

EXPRESS MAIL LABEL NO. EL722132461US

RECEIVED

PATENT APPLICATION

NOV 30 Docket No: 11675.107

TO 2000 MAIL ROOM

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



re application of

David Y. Kao and Fernando Gonzalez

Serial No.

08/720,693

Filed:

October 2, 1996

For:

OXIDATION OF ION IMPLANTED
SEMICONDUCTORS

Examiner:

George Fourson III

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) Art Unit
) 2823
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AMENDMENT "E" AND RESPONSE

BOX NON-FEE AMENDMENT

The Assistant Commissioner of Patents
and Trademarks
Washington, D. C. 20231

Sir:



In response to the Office Action dated August 24, 2001, Applicants submit this Amendment

"E" and Response. Please amend the above-identified application as follows:

IN THE CLAIMS:

Clean Version of the Pending Claims

The pending claims are submitted below in accordance with 37 C.F.R. § 1.121(c)(3), which presents a clean version of the entire set of pending claims in this single amendment paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): David Y. Kao and Fernando Gonzalez				RECEIVED NOV 30 2001 TC 2000 MAIL ROOM	
Serial No. 08/720,693		Filing Date October 2, 1996		Examiner George Fourson III	
				Group Art Unit 2823	
Invention: OXIDATION OF ION IMPLANTED SEMICONDUCTORS					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	35 -	44 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	6 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 23-3178 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;"><div style="transform: rotate(90deg); transform-origin: right top;">RECEIVED- NOV 30 2001 TC 2000 MAIL ROOM</div><div style="text-align: center;">Dated: November 26, 2001</div></div></div>					
<div style="display: flex; justify-content: space-between;"><div><div style="text-align: center;"> Signature</div><div>Jesus Juanos i Timoneda, Ph. D. Attorney for Applicant Reg. No. 43,332</div><div style="text-align: center;"> 022901 PATENT TRADEMARK OFFICE</div></div><div style="border: 1px solid black; padding: 5px; width: 300px;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</div><div style="border-top: 1px solid black; height: 30px; margin-top: 10px;"></div><div style="border-top: 1px solid black; height: 30px; margin-top: 10px;"></div></div></div>					
CC:					